

# CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

RECEIVED  
CITY OF SAN ANTONIO  
CITY CLERK

FORM C/OH  
COVER SHEET PG 1

2004 JAN 15 PM 4:45

The C/OH INSTRUCTION GUIDE explains how to complete this form.		1 ACCOUNT # (Ethics Commission filers)		2 Total pages this report:  1/2	
3 CANDIDATE / OFFICEHOLDER NAME	TITLE FIRST MI Philip A.				OFFICE USE ONLY
	NICKNAME LAST SUFFIX Phil Cortez				
4 CANDIDATE / OFFICEHOLDER ADDRESS  <input type="checkbox"/> Change of Address	ADDRESS / PO BOX: APT / SUITE #: CITY: STATE: ZIP CODE P.O. Box 240758 San Antonio TX 78224				Date Received
					Date Hand-delivered or Date Postmarked
5 CAMPAIGN TREASURER NAME	TITLE FIRST MI Rose				Receipt # Amount
	NICKNAME LAST SUFFIX Cortez				Date Processed Date Imaged
6 CAMPAIGN TREASURER ADDRESS (Residence or business)	STREET ADDRESS (NO PO BOX PLEASE): APT / SUITE #: CITY: STATE: ZIP CODE 351 McNamey San Antonio TX 78211				
7 CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER EXTENSION ( 210 ) 923-1557				
8 REPORT TYPE	<input checked="" type="checkbox"/> January 15 <input type="checkbox"/> 30th day before election <input type="checkbox"/> Runoff <input type="checkbox"/> 15th day after campaign treasurer appointment (officeholder only) <input type="checkbox"/> July 15 <input type="checkbox"/> 8th day before election <input type="checkbox"/> Exceeded \$500 limit <input type="checkbox"/> Final report (Attach C/OH - FR)				
9 PERIOD COVERED	Month Day Year    THROUGH    Month Day Year 07/01/2003    12/31/2003				
10 ELECTION	ELECTION DATE Month Day Year 05/03/2003		ELECTION TYPE <input type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> General <input type="checkbox"/> Special		
11 OFFICE	OFFICE HELD (if any)		12 OFFICE SOUGHT (if known) Other -- City Council District 4		
13 DIRECT CAMPAIGN EXPENDITURE BY OTHER INDIVIDUALS  <input type="checkbox"/> additional pages	... Direct campaign expenditures are campaign expenditures made by others without the candidate's prior consent or approval. Candidates are required to disclose this information only if they receive notification of the direct campaign expenditure. ...				
	Name				
	Address/PO Box: Apt. / Suite #: City: State: Zip Code				
GO TO PAGE 2					

# CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

RECEIVED  
CITY OF SAN ANTONIO  
CITY CLERK  
2004 JAN 15 PM 4:45

FORM C/OH  
COVER SHEET PG 2

15 C/OH NAME

16 ACCOUNT # (Ethics Commission filers)

## 17 NOTICE FROM POLITICAL COMMITTEE(S)

\*\* This box is for notice of political expenditures by political committees to support the candidate / officeholder. These expenditures may have been made without the candidate's or officeholder's knowledge or consent. Candidates and officeholders are required to report this information only if they receive notice of such expenditures. \*\*

## COMMITTEE TYPE

☐ GENERAL

☐ SPECIFIC

COMMITTEE NAME

COMMITTEE ADDRESS

COMMITTEE CAMPAIGN TREASURER NAME

COMMITTEE CAMPAIGN TREASURER ADDRESS

☐ additional pages

## 18 CONTRIBUTION TOTALS

1. TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED

\$

0

2. TOTAL POLITICAL CONTRIBUTIONS  
(OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)

\$

0

## EXPENDITURE TOTALS

3. TOTAL POLITICAL EXPENDITURES OF \$50 OR LESS, UNLESS ITEMIZED

\$

0

4. TOTAL POLITICAL EXPENDITURES

\$

0

## CONTRIBUTION BALANCE

5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD

\$

0

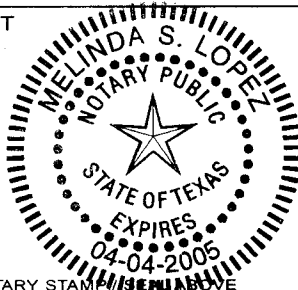
## OUTSTANDING LOAN TOTALS

6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD

\$

0

## 19 AFFIDAVIT



AFFIX NOTARY STAMP HERE

I swear, or affirm, under penalty of perjury, that the accompanying report is true and correct and includes all information required to be reported by me under Title 15, Election Code.

*Philip Cortez*  
Signature of Candidate or Officeholder

Sworn to and subscribed before me, by the said Philip Cortez, this the 15th day of January, 2004, to certify which, witness my hand and seal of office.

*Melinda S. Lopez*  
Signature of officer administering oath

Melinda S. Lopez  
Printed name of officer administering oath

*Notary*  
Title of officer administering oath